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| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: Identify Yourself | | | |
|-----|---|--|---|-------------|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case | ∍): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Linda First name J. Middle name | First name Middle name | |
| | Bring your picture identification to your meeting with the trustee. | Smith Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | |
| 2. | All other names you have used in the last 8 years | ve | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-8060 | | |

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Case number (if known)

Debtor 1 Linda J. Smith

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | 656 East 160th Court | If Debtor 2 lives at a different address: | | | |
| | | South Holland, IL 60473 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Cook | | | | |
| | | County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

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Document Case number (if known) Debtor 1 Linda J. Smith

| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> 1 page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy box. | |
|------------|---|---------------------------------------|----------------|------------------------------------|---|--|--|
| | choosing to file under | ■ Chapter 7 □ Chapter 11 □ Chapter 12 | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | ☐ Ch | napter 13 | | | | |
| В. | How you will pay the fee | _ | about how you | ı may pay. Typ attorney is subr | pically, if you are paying the fee you | with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money lf, your attorney may pay with a credit card or check with | |
| | | | | | tallments. If you choose this optios (Official Form 103A). | n, sign and attach the Application for Individuals to Pay | |
| | | | I request that | my fee be wa | ived (You may request this option | only if you are filing for Chapter 7. By law, a judge may, ir income is less than 150% of the official poverty line tha | |
| | | | applies to you | r family size ar | nd you are unable to pay the fee in | installments). If you choose this option, you must fill out all Form 103B) and file it with your petition. | |
|) . | Have you filed for bankruptcy within the last 8 years? | ■ No. | | | | | |
| | lust o yours. | □ 163 | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| 0. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | S. | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your residence? | ■ No. | Go to li | ne 12. | | | |
| | | ☐ Yes | s. Has you | ır landlord obta | ained an eviction judgment against | you? | |
| | | | | No. Go to line | 12. | | |
| | | | | | | | |

| Debtor 1 | Linda J. Smith | Document | Page 4 of 54 Case | number (if known) | |
|----------|----------------|----------|-------------------|-------------------|--|
|----------|----------------|----------|-------------------|-------------------|--|

| | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | o Part 4. |
|------|---|-------------------------------------|--------------------------------------|--|
| | | ☐ Yes. | Nam | e and location of business |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numl | ber, Street, City, State & ZIP Code |
| | it to this petition. | | Chec | ck the appropriate box to describe your business: |
| | | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as defined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation in 11 U.S | s. If you i s, cash-f .C. 1116 | nder Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure of (1)(B). not filing under Chapter 11. |
| | For a definition of small | ■ No. | i aiii | not himg under Chapter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | l am Code | filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy e. |
| | | ☐ Yes. | I am | filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| | | | Hazard | ous Property or Any Property That Needs Immediate Attention |
| Part | Report if You Own or | Have Any | | |
| | Do you own or have any property that poses or is alleged to pose a threat of imminent and | ■ No. □ Yes. | | the hazard? |
| | Do you own or have any property that poses or is alleged to pose a threat | ■ No. | What is | the hazard? diate attention is , why is it needed? |

Debtor 1 Linda J. Smith

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Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known)

| 16. | What kind of debts do you have? | 16a. | | consumer debts? Consumer debts rsonal, family, or household purpose | s are defined in 11 U.S.C. § 101(8) as "incurred by an e." | | | |
|-----|---|------------------------------|--|--|---|--|--|--|
| | | | ☐ No. Go to line 16b. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | 16b. | Are your debts primarily I money for a business or inv | ousiness debts? Business debts a vestment or through the operation of | re debts that you incurred to obtain f the business or investment. | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you | owe that are not consumer debts of | r business debts | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapte | er 7. Go to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | | Do you estimate that after any exercival able to distribute to unsecured of | mpt property is excluded and administrative expense creditors? | | | |
| | administrative expenses | | ■ No | | | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | ☐ Yes | | | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-1 | | ☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000 | | | |
| | | □ 200-9 | 99 | | | | | |
| 19. | How much do you estimate your assets to be worth? | \$100 , | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 mill □ \$100,000,001 - \$500 mi | on | | | |
| | | _ +555, | | | | | | |
| 20. | How much do you estimate your liabilities to be? | \$100 , | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 milli □ \$100,000,001 - \$500 mi | on | | | |
| Par | t 7: Sign Below | | | | | | | |
| For | you | I have ex | amined this petition, and I de | eclare under penalty of perjury that t | the information provided is true and correct. | | | |
| | | | | | f eligible, under Chapter 7, 11,12, or 13 of title 11, , and I choose to proceed under Chapter 7. | | | |
| | | | | not pay or agree to pay someone whe notice required by 11 U.S.C. § 3 | who is not an attorney to help me fill out this 42(b). | | | |
| | | I request | relief in accordance with the | chapter of title 11, United States Co | ode, specified in this petition. | | | |
| | | bankrupt and 3571 | cy case can result in fines up | | money or property by fraud in connection with a up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 | | | |
| | | Linda J | | Signature | of Debtor 2 | | | |
| | | Executed | | Executed 0 | | | | |
| | | | MM / DD / YYYY | | MM / DD / YYYY | | | |

Debtor 1 Linda J. Smith

Debtor 1 Linda J. Smith

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David M. Dabertin | Date | March 13, 2018 |
|--|-----------------|----------------|
| Signature of Attorney for Debtor | _ | MM / DD / YYYY |
| | | |
| David M. Dabertin 19314-45 | | |
| Printed name | | |
| David M. Dabertin | | |
| Firm name | | |
| 5246 Hohman Avenue, Suite 302 | | |
| Hammond, IN 46320 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 219-937-1719 | Email address | |
| 219-931-1119 | Liliali addiess | |
| 19314-45 IL | | |
| Bar number & State | | |

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| | | DOCUM | <u>-: 11 Paue 6 01 54</u> | <u> </u> | |
|---------------------|--------------------------|-------------------|---------------------------|----------|-----------------------|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Linda J. Smith | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number _ | | | | | ☐ Check if this is an |
| | | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | | Your a | ssets of what you own |
|-----|--|-------------|----------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 100,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 5,070.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 105,070.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | i abilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 197,418.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 15,595.00 |
| | Your total liabilities | \$ | 213,013.00 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,022.53 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,021.69 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,285.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | C | ase 18-07193 | Doc 1 | Filed 03/13/18 Document | Entered 03/13/18 | 8 14:01:07 | Desc | Main |
|-----------|--|---|----------------------------|---|---|-------------------------------------|---|--|
| Fill | in this info | rmation to identify yo | ur case and t | | | | | |
| Deb | otor 1 | Linda J. Smith | | | | | | |
| | | First Name | Midd | le Name | Last Name | | | |
| | otor 2 ouse, if filing) | First Name | Midd | le Name | Last Name | | | |
| Uni | ted States E | Bankruptcy Court for the | e: NORTHER | RN DISTRICT OF ILLIN | NOIS | | | |
| Cas | se number | | | | - | | | Check if this is an amended filing |
| _ | | orm 106A/B I le A/B: Pr o | nerty | | | | | 12/15 |
| | | | <u> </u> | an asset only once. If a | n asset fits in more than one | category, list the a | sset in the | |
| Pari D | ver every que 11: Describ 0 you own o 1 No. Go to F | estion. ve Each Residence, Build r have any legal or equita | ling, Land, or O | ther Real Estate You Ow | e top of any additional pages, on or Have an Interest In land, or similar property? | write your name a | nd case n | umber (if known). |
| 1.1 | 656 Eas | t 160th Court | | What is the property ■ Single-family h | | Do not deduct sec | ured claim: | s or exemptions. Put |
| | Street address | Street address, if available, or other description | | Duplex or mult | ti-unit building or cooperative | the amount of any | any secured claims on Schedule D: Have Claims Secured by Property. | |
| | South H | olland IL 6 | 50473-0000 ZIP Code | ☐ Manufactured ☐ Land ☐ Investment pro | or mobile home | Current value of t entire property? | ŗ | Current value of the portion you own? \$100,000.00 |
| | | | | _ | in the property? Check one | | le, tenanc | r ownership interest by by the entireties, or |
| | Cook | | | ■ Debtor 1 only □ Debtor 2 only | | | | |
| | County | | | Debtor 1 and I At least one of | the debtors and another bu wish to add about this item | (see instructions | | unity property |
| | | | | | | | | |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$100,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

| No Yes | trucks, tractors | , sport utility ve | hicles, motorcycles | | |
|--------------------|---|--|--|---|---|
| Yes Make: Model: | | | | | |
| Make: Model: | | | | | |
| Model: | | | | | |
| Model: | Niccon | | | Do not deduct sec | ured claims or exemptions. Put |
| | A1(! | | Who has an interest in the property? Check one | the amount of any | secured claims on Schedule D: |
| | 2007 | | ■ Debtor 1 only □ Debtor 2 only | | ve Claims Secured by Property. |
| Approxin | nate mileage: | 138000 | Debtor 1 and Debtor 2 only | Current value of t entire property? | he Current value of the portion you own? |
| • • • | _ | | ☐ At least one of the debtors and another | | |
| | | | <u>_</u> | ¢2 200 | 00 |
| | | | ☐ Check if this is community property (see instructions) | \$2,300 | .00 \$2,300.00 |
| Yes | | | | | \$2,300.00 |
| 3: Descri | be Your Personal a | and Household Ite | ems | | |
| | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| xamples: No | Major appliances, | | china, kitchenware | | |
| | De | ebtor(s) in the | ir household including refrigerator, micı | | \$1,800.00 |
| Examples: | Televisions and ra | | | nters, scanners; music co | ollections; electronic devices |
| Yes. De | scribe | | | | |
| | TV | /s, computer, | printer and cell phone | | \$500.00 |
| xamples: | Antiques and figu | | | art objects; stamp, coin, | or baseball card collections; |
| | scribe | | | | |
| xamples: ■ No | Sports, photograp musical instrume | ohic, exercise, an | d other hobby equipment; bicycles, pool tables, | golf clubs, skis; canoes a | and kayaks; carpentry tools; |
| | Other inf Other inf Vatercraft, xamples: B No I No I Yes Descri you own of I No I Yes. De Collectibles Examples: No I Yes. De | Other information: Vatercraft, aircraft, motor hamples: Boats, trailers, motor hamples: Describe Your Personal a you own or have any legal household goods and furnific xamples: Major appliances. No Yes. Describe Motor hamples: Televisions and raincluding cell photor hamples: Televisions and raincluding cell photor hamples: Antiques and figure other collections, however, and hamples: Sports, photograf musical instrume. No | Other information: Watercraft, aircraft, motor homes, ATVs an examples: Boats, trailers, motors, personal water and the dollar value of the portion you ow pages you have attached for Part 2. Write to page you have attached for Part 2. Write to page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into page you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have attached for Part 2. Write to you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable into you own or have any legal or equitable int | Other information: At least one of the debtors and another Check if this is community property (see instructions) Check if this is community property (see instructions) Add the dollar value of the portion you own for all of your entries from Part 2, including bages you have attached for Part 2. Write that number here | Atteast one of the debtors and another Check if this is community property \$2,300 |

| | | Case | 18-07193 | Doc 1 | Filed 03/13/18 Document | Entered 03/13/18 14:01 | L:07 Desc Main |
|-----|---|---|---|--------------------------------|--|--|---|
| De | btor 1 | Linda J | . Smith | | Boodinone | Page 12 of 54 Case number (if | known) |
| | ■ No | | | ns, ammunitior | n, and related equipment | | |
| | □ No · | | • | s, leather coats | s, designer wear, shoes, | accessories | |
| | 100. | 20001120 | | nal used clo | thina | | \$100.00 |
| | □ No | | | stume jewelry, | engagement rings, wed | ding rings, heirloom jewelry, watches, | gems, gold, silver |
| | | | Costu | me jewelry a | and jewelry | | \$300.00 |
| 14. | Examp ■ No □ Yes. Any oth ■ No □ Yes. Add the for Pa | Describe ner persor Give spec ne dollar v rt 3. Write | cats, birds, hor all and housel ific information. | hold items you your entries fr | | ncluding any health aids you did no ny entries for pages you have attach | |
| Do | you ow | n or have | any legal or e | quitable intere | est in any of the follow | ing? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ■ No | • | | | our home, in a safe depo | osit box, and on hand when you file yo | ur petition |
| | | | ting, savings, o | | al accounts; certificates counts with the same ins | of deposit; shares in credit unions, brolititution, list each. | cerage houses, and other similar |
| | Yes | | | | Institution r | ame: | |
| | | | 17.1. | Checking | Credit Un | ion 1 | \$20.00 |
| | | | 17.2. | Checking | US Bank | | \$50.00 |
| 18. | | | ınds, or public funds, investme | | cks ith brokerage firms, mor | ney market accounts | |
| | | | | Institution or is | ssuer name: | | |

page 3

Case 18-07193 Doc 1 Filed 03/13/18 Entered 03/13/18 14:01:07 Desc Main Page 13 of 54
Case number (if known) Document Debtor 1 Linda J. Smith 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **Public Employees** Pension through work Unknown Retirement 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

■ No

| Do | Case 18 | | Document | Page 14 of 54 Case number (if known | Desc Main |
|-----|--|---|-----------------------------|--|----------------------------|
| De | ebtor 1 Linda J. Sr | nitn | | Case number (if known |) |
| | ☐ Yes. Give specific in | nformation | | | |
| | | ages, disability insurance unpaid loans you made to | | nefits, sick pay, vacation pay, workers' comp | ensation, Social Security |
| | • | | | | |
| | Interests in insurance Examples: Health, dis ☐ No | • | health savings account (| (HSA); credit, homeowner's, or renter's insur- | ance |
| | Yes. Name the insu | rance company of each p Company name: | | Beneficiary: | Surrender or refund value: |
| | | Term life throu | ugh work | | \$0.00 |
| | | , , , | | ed Isurance policy, or are currently entitled to re | ceive property because |
| | | , employment disputes, ir | | it or made a demand for payment s to sue | |
| | Other contingent and ■ No □ Yes. Describe each | - | f every nature, includin | g counterclaims of the debtor and rights | to set off claims |
| 35. | Any financial assets | you did not already list | t | | |
| | ■ No | | | | |
| | ☐ Yes. Give specific i | nformation | | | |
| 36 | | • | , | ny entries for pages you have attached | \$70.00 |
| Pai | rt 5: Describe Any Busi | ness-Related Property You | u Own or Have an Interest | In. List any real estate in Part 1. | |
| 37. | Do you own or have any | / legal or equitable interest | t in any business-related p | property? | |
| | No. Go to Part 6. | | | | |
| | Yes. Go to line 38. | | | | |
| Pai | | n- and Commercial Fishing an interest in farmland, list it i | | rn or Have an Interest In. | |
| 46. | Do you own or have No. Go to Part 7. Yes. Go to line 47. | any legal or equitable i | nterest in any farm- or | commercial fishing-related property? | |
| Pa | rt 7: Describe All F | Property You Own or Have | an Interest in That You Die | d Not List Above | |
| | | roperty of any kind you | | | |
| | Examples: Season tid | ckets, country club memb | | | |
| | ■ No | oformation | | | |

Official Form 106A/B Schedule A/B: Property page 5

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Document Debtor 1

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Case number (if known) Linda J. Smith 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$100,000.00 Part 2: Total vehicles, line 5 \$2,300.00 Part 3: Total personal and household items, line 15 57. \$2,700.00 Part 4: Total financial assets, line 36 58. \$70.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$5,070.00 Copy personal property total \$5,070.00 Total of all property on Schedule A/B. Add line 55 + line 62 \$105,070.00

Official Form 106A/B Schedule A/B: Property page 6

| Fill in this information to identify your case: Debtor 1 Linda J. Smith First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name |
|---|
| First Name Middle Name Last Name Debtor 2 |
| Debtor 2 |
| |
| (Spouse if, filing) First Name Middle Name Last Name |
| |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |
| Case number |
| (if known) |
| |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the Pro | perty You | Claim as | Exempt |
|---------|----------|---------|-----------|----------|--------|
|---------|----------|---------|-----------|----------|--------|

| 1. | Which set of exemp | otions are | you claiming? | Check one only | . even if | vour spouse i | s filina with | vou. |
|----|--------------------|------------|---------------|----------------|-----------|---------------|---------------|------|
|----|--------------------|------------|---------------|----------------|-----------|---------------|---------------|------|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from | | ount of the exemption you claim eck only one box for each exemption. | Specific laws that allow exemption | |
|--|---|------------------|---|------------------------------------|--|
| 656 East 160th Court South Holland, IL 60473 Cook County | \$100,000.00 | 15,000.00 | | 735 ILCS 5/12-901 | |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Miscellaneous household goods and furnishings used by the Debtor(s) in | \$1,800.00 | | \$1,800.00 | 735 ILCS 5/12-1001(b) | |
| their household including refrigerator, microwave, bedroom set and couches Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| TVs, computer, printer and cell phone | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) | |
| Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Personal used clothing Line from Schedule A/B: 11.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(a) | |
| Zino nom estisado 702. TTT | | | 100% of fair market value, up to any applicable statutory limit | | |
| Costume jewelry and jewelry Line from Schedule A/B: 12.1 | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(b) | |
| LINE HOLL SCHEDULE AVD. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

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Case number (if known)

| DCDIO | Linua J. Ollilli | | | | |
|------------|---|--------------------------------------|---------|---|-----------------------|
| | ief description of the property and line on hedule A/B that lists this property | Current value of the portion you own | Am | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Che | | |
| | necking: Credit Union 1 ne from Schedule A/B: 17.1 | \$20.00 | | \$20.00 | 735 ILCS 5/12-1001(b) |
| <u>_</u> " | ic from Generalic AVB. TTT | | | 100% of fair market value, up to any applicable statutory limit | |
| | necking: US Bank | \$50.00 | | \$50.00 | 735 ILCS 5/12-1001(b) |
| | io iioiii Goriedale / v Z. T I Z | | | 100% of fair market value, up to any applicable statutory limit | |
| | ublic Employees Retirement: | Unknown | | \$0.00 | 735 ILCS 5/12-1006 |
| | ne from <i>Schedule A/B</i> : 21.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | e you claiming a homestead exemption ubject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes | 3 years after that for ca | ises fi | , | |

| | | | Document | Page 1 | 8 of 54 | _ | |
|----------|-----------------------------------|-------------------------|--|-------------------|--------------------------|----------------------|---------------|
| Fill in | n this informa | ation to identify you | ır case: | | | | |
| Debt | or 1 | Linda J. Smith | | | | | |
| | 0. 1 | First Name | Middle Name | Last Name | | | |
| Debt | or 2 | | | | | | |
| (Spous | se if, filing) | First Name | Middle Name | Last Name | | | |
| Unite | ed States Banl | kruptcy Court for the: | NORTHERN DISTRICT OF ILL | LINOIS | | | |
| | | | | | | | |
| | number | | | | | | |
| (if knov | wn) | | | | | | if this is an |
| | | | | | | ameno | ed filing |
| Ott: | -:-! - | 400D | | | | | |
| | cial Form | | | | | | |
| Sch | nedule [| D: Creditors | Who Have Claims | Secure | ed by Property | | 12/15 |
| is nee | | | If two married people are filing togeth out, number the entries, and attach it | | | | |
| 1. Do a | any creditors h | ave claims secured by | y your property? | | | | |
| | ☐ No. Check t | this box and submit the | his form to the court with your other | schedules. | You have nothing else to | report on this form. | |
| | Yes Fill in a | all of the information | helow | | | | |
| | | | Sciow. | | | | |
| Part | List All | Secured Claims | | | . Column A | Column B | Column C |
| | | | more than one secured claim, list the cre a particular claim, list the other creditor | | ely | Value of collateral | Unsecured |
| | | | cal order according to the creditor's nam | | | that supports this | portion |
| | 0 | | | | value of collateral. | claim | If any |
| | Corporatio | | Describe the property that secures | the claim: | \$4,800.00 | \$2,300.00 | \$2,500.00 |
| <u> </u> | Corporatio Creditor's Name | <u> </u> | 2007 Nissan Altima 138000 | | | | |
| | | | 2007 Nissaii Aitiilia 130000 | 1111163 | | | |
| | | | | | | | |
| | P. O. Box 5 | 513 | As of the date you file, the claim is: apply. | Check all that | | | |
| | Southfield, | MI 48037 | ☐ Contingent | | | | |
| - | Number, Street, C | City, State & Zip Code | ☐ Unliquidated | | | | |
| | | | ☐ Disputed | | | | |
| Who | owes the deb | t? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ De | ebtor 1 only | | ☐ An agreement you made (such as | mortgage or s | ecured | | |
| □ De | ebtor 2 only | | car loan) | | | | |
| □ De | ebtor 1 and Deb | otor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| ☐ At | least one of the | e debtors and another | ☐ Judgment lien from a lawsuit | , | | | |
| □ сі | heck if this clai | im relates to a | Other (including a right to offset) | Purchase | money security inter | rest | |
| С | ommunity deb | t | , | | | | _ |
| Date | debt was incur | red 2016 | Last 4 digits of account num | ber | | | |
| 2.2 | Select Port | folio Services | Describe the property that secures | the claim: | \$192,618.00 | \$100,000.00 | \$92,618.00 |
| | Creditor's Name | | 656 East 160th Court South | | | | |
| | | | IL 60473 Cook County | i i o ii a ii a i | | | |
| | | | _ | | | | |
| | P. O. box 6 | | As of the date you file, the claim is: apply. | Check all that | | | |
| | Salt Lake C | City, UT 84165 | Contingent | | | | |
| | Number, Street, C | City, State & Zip Code | ☐ Unliquidated | | | | |
| | | | ☐ Disputed | | | | |
| Who | owes the deb | t? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ De | ebtor 1 only | | ☐ An agreement you made (such as | mortgage or s | ecured | | |
| □ De | ebtor 2 only | | car loan) | | | | |
| □ De | ebtor 1 and Deb | otor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| | | e debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| | heck if this clai ommunity deb | | Other (including a right to offset) | Mortgage | | | |
| Date | debt was incur | red 9/2001 | Last 4 digits of account num | ber | | | |

Official Form 106D

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| Debtor | 📵 Linda J. Sm | ith | | Case number (if know) | |
|--------|---------------------------------------|------------------------------|------------------------------------|-----------------------|----|
| | First Name | Middle Name | Last Name | | |
| | | | | | |
| Add t | he dollar value of y | our entries in Column A on t | this page. Write that number here: | \$197,418.0 | 00 |
| | is the last page of that number here: | your form, add the dollar va | lue totals from all pages. | \$197,418.0 | 00 |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | 0000 10 07 100 2 | Document | Page 2 | n of 54 | ,, ,,, | o man |
|---------------------------|--|---|---|---------------------------------------|-----------------|--------------------------|
| Fill in this | s information to identify your o | | 1 | | | |
| Debtor 1 | Linda J. Smith | | | | | |
| DCDIOI 1 | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, fil | ling) First Name | Middle Name | Last Name | | | |
| United Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLI | INOIS | | | |
| Case num | nber | | | | | |
| (if known) | | | | | ☐ CH | neck if this is an |
| | | | | | an | nended filing |
| O#:-:-I | Γο was 400Γ/Γ | | | | | |
| | Form 106E/F | | OI - ' | | | 40/45 |
| | | ho Have Unsecured (e Part 1 for creditors with PRIORITY | | | | 12/15 |
| Schedule D eft. Attach | : Creditors Who Have Claims Seci | ired Leases (Official Form 106G). Do ured by Property. If more space is n e. If you have no information to repo | eeded, copy t | he Part you need, fill it out, nu | ımber the enti | ries in the boxes on the |
| Part 1: | List All of Your PRIORITY Un | secured Claims | | | | |
| 1. Do an | y creditors have priority unsecured | d claims against you? | | | | |
| ■ No. | . Go to Part 2. | | | | | |
| ☐ Yes | S. | | | | | |
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims | | | | |
| 3. Do any | y creditors have nonpriority unsec | ured claims against you? | | | | |
| □ No. | . You have nothing to report in this pa | art. Submit this form to the court with y | our other sche | edules. | | |
| ■ Yes | · - | | | | | |
| - res | S. | | | | | |
| unsecu | ured claim, list the creditor separately ne creditor holds a particular claim, li | aims in the alphabetical order of the of or each claim. For each claim listed, st the other creditors in Part 3.If you ha | identify what t | ype of claim it is. Do not list clain | ns already incl | uded in Part 1. If more |
| | | | | | | Total claim |
| 4.1 A | dvocate Medical Group | Last 4 digits of acco | unt number | 4375 | | \$20.00 |
| N | onpriority Creditor's Name | | | | - | |
| | 550 W. Bryn Mawr Ave. 8th | FI. When was the debt i | ncurred? | 2017 | | |
| | thicago, IL 60631 umber Street City State Zlp Code | As of the date you fi | le. the claim i | s: Check all that apply | | |
| | /ho incurred the debt? Check one. | , o a , o | , | or orlook all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| _ | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| _ | At least one of the debtors and and | T (NONDDIOD! | TY unsecured | d claim: | | |
| _ | Check if this claim is for a comm | Chudant laans | | | | |
| | ebt | <u> </u> | out of a sepa | ration agreement or divorce that | you did not | |
| Is | the claim subject to offset? | report as priority claim | | 3 | • | |
| | No | ☐ Debts to pension of | or profit-sharin | g plans, and other similar debts | | |
| |] Yes | Other. Specify | ledical bill | s | | |
| | | · — | | | | |

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Case number (if know)

| DCDIC | Linua J. Simui | - Case number (II know) | |
|-------|---|---|------------|
| 4.2 | AmeriCash Loans | Last 4 digits of account number | \$2,250.00 |
| | Nonpriority Creditor's Name 880 Lee Street Ste 302 | When was the debt incurred? 2009 | |
| | Des Plaines, IL 60016 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | Other. Specify Unsecured loan | |
| 4.3 | Capital One | Last 4 digits of account number 2631 | \$933.00 |
| | Nonpriority Creditor's Name Bankruptcy Dept. 6125 Lakeview Road, Ste. 800 | When was the debt incurred? | · · |
| | Charlotte, NC 28269-2605 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the claim is. Check all that apply | |
| | ■ Debtor 1 only | Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit card purchases | |
| 4.4 | Comcast | Last 4 digits of account number 1176 | \$75.00 |
| | Nonpriority Creditor's Name PO Box 3002 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection | |
| | | · · · | |

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Case number (if know)

Debtor 1 Linda J. Smith 4.5 \$298.00 Comenity Last 4 digits of account number 3337 Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? PO Box 182125 Columbus, OH 43218-2125 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card purchases-Lane Bryant ☐ Yes 4.6 **Credit Union 1** Last 4 digits of account number 0415 Unknown Nonpriority Creditor's Name 200 East Champaign Avenue When was the debt incurred? Rantoul, IL 61866 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.7 \$913.00 Discover Last 4 digits of account number 3604 Nonpriority Creditor's Name PO Box 30943 When was the debt incurred? 2014 Salt Lake City, UT 84130-0943 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection ☐ Yes

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Debtor 1 Linda J. Smith Case number (if know) 4.8 \$330.00 George E. Morris Last 4 digits of account number 6645 Nonpriority Creditor's Name 2158 W. 183rd Street When was the debt incurred? 2017 Homewood, IL 60430 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical bills Other. Specify 4.9 **Home Depot** Last 4 digits of account number Unknown Nonpriority Creditor's Name PO Box 790340 When was the debt incurred? Saint Louis, MO 63179-0340 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit card purchases 4.1 **Illinois Lending** 8060 \$1.500.00 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? 15826 S. LaGrange Road Orland Park, IL 60462 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured loan ☐ Yes

Document Page 24 of 54 Debtor 1 Linda J. Smith Case number (if know) 4.1 **Kia Motors Finance** 2242 Unknown Last 4 digits of account number Nonpriority Creditor's Name PO Box 20825 When was the debt incurred? Fountain Valley, CA 92728 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Deficiency ☐ Yes 4.1 Kohl's Unknown Last 4 digits of account number Nonpriority Creditor's Name P. O. Box 3043 When was the debt incurred? Milwaukee, WI 53201-3043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card purchases ☐ Yes 4.1 **MD Orthotic & Prosthetic** 7302 \$17.00 Last 4 digits of account number Nonpriority Creditor's Name 10408 S. Western Avenue When was the debt incurred? 2017 Chicago, IL 60643 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

report as priority claims

■ Other. Specify Medical bills

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Document Page 25 of 54 Debtor 1 Linda J. Smith Case number (if know) 4.1 One Main Financial 7992 \$699.00 Last 4 digits of account number 4 Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? PO Box 6042 Sioux Falls, SD 57117-6042 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Unsecured Ioan 4.1 **Personal Finance Company** Unknown Last 4 digits of account number Nonpriority Creditor's Name 9438 W. 191st Street When was the debt incurred? Mokena, IL 60448 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured loan ☐ Yes 4.1 **PLS Financial Services** 9555 \$1,411.00 6 Last 4 digits of account number Nonpriority Creditor's Name 800 Jorie Blvd When was the debt incurred? Oak Brook, IL 60523 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

■ Other. Specify Collection

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

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Document Page 26 of 54 Debtor 1 Linda J. Smith Case number (if know) 4.1 Portfolio Recovery Assoc. 0631 \$6,077.00 Last 4 digits of account number Nonpriority Creditor's Name P. O. Box 12914 When was the debt incurred? Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Collection-original creditor Comenity/Room ☐ Yes Other. Specify Place 4.1 **RHHS** Unknown Last 4 digits of account number 8 Nonpriority Creditor's Name 1000 Abernathy Road When was the debt incurred? Building 400, Suite 200 Atlanta, GA 30328 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify On account **Sears Card** Unknown Last 4 digits of account number Nonpriority Creditor's Name PO Box 6283 When was the debt incurred? Sioux Falls, SD 57117-6283 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

debt

■ No

☐ Yes

 \square Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

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Case number (if know)

| 4.2 0 | Synchrony Bank | Last 4 digits of account number 6774 | \$1,072.00 |
|----------|--|---|------------|
| <u> </u> | Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 965060 | When was the debt incurred? | · |
| | Orlando, FL 32896-5060 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit card purchases-Amazon | |
| 4.2 1 | Village of Orland Park/Water | Last 4 digits of account number 7673 | Unknown |
| | Nonpriority Creditor's Name 14700 Ravinia Avenue Orland Park, IL 60462 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify | |
| 4.2 2 | wow | Last 4 digits of account number | Unknown |
| | Nonpriority Creditor's Name PO Box 4350 | When was the debt incurred? | |
| | Carol Stream, IL 60197-5715 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the claim is. Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify On account | |
| | | — Outlot, Opeony | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| Debtor 1 Linda J. Smith | Case number (if know) | | | | | |
|---|--|--|--|--|--|--|
| Name and Address On which entry in I | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | | |
| Capital Management Services Line <u>4.7</u> of (Chec | k one): Part 1: Creditors with Priority Unsecured Claims | | | | | |
| 726 Exchange Street Ste 700 Buffalo, NY 14210 | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | | |
| • | Last 4 digits of account number | | | | | |
| Name and Address On which entry in | Part 1 or Part 2 did you list the original creditor? | | | | | |
| IC System, Inc. | k one): Part 1: Creditors with Priority Unsecured Claims | | | | | |
| PO Box 64437 Saint Paul, MN 55164-0437 | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | | |
| Last 4 digits of acc | count number | | | | | |
| Name and Address On which entry in I | Part 1 or Part 2 did you list the original creditor? | | | | | |
| Praxis Financial Solutions Line 4.16 of (Che | eck one): Part 1: Creditors with Priority Unsecured Claims | | | | | |
| 7301 N. Lincoln Ave., Suite 220 Lincolnwood, IL 60712-1733 | Part 2: Creditors with Nonpriority Unsecured Claims | | | | | |
| Last 4 digits of acc | count number | | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | 7 | Total Claim |
|--------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | 1 | Γotal Claim |
| Total | 6f. | Student loans | 6f. | \$ | 0.00 |
| claims | _ | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 15,595.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 15,595.00 |

| | | 17(7(4))))) | 111 1 710 1 7 3 1 1 3 4 | |
|---|-------------------------|-------------------|------------------------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Linda J. Smith | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company wit | h whom you have the cer, Street, City, State and ZIP Co | contract or lease | State what the contract or lease is for |
|-----|-----------|-------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.2 | | | | | _ |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | · · | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | Jity | | Olalo | 211 0000 | |

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| | | | <u>:III Paue 30 C</u> | 11 54 | |
|-------------------------------|--|-------------------------------|-------------------------|---|--|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Linda J. Smith | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filin | g) First Name | Middle Name | Last Name | | |
| United Stat | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | , , | | | | |
| Case numb (if known) | per | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official | Form 106H | | | | |
| | ule H: Your Cod | obtoro | | | 40/45 |
| Scried | ule n. Tour Cou | enrois | | | 12/15 |
| | and case number (if known) | , , | | as a codebtor. | |
| ■ No □ Yes | | | | | |
| | nin the last 8 years, have you a, California, Idaho, Louisiana, | | | | states and territories include |
| | Go to line 3. . Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| | | | | | |
| in line Form 1 | 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make | sure you have listed the | with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor lame, Number, Street, City, State and Z | P Code | | Column 2: The cred Check all schedules | ditor to whom you owe the debt s that apply: |
| 3.1 | | | | ☐ Schedule D, line | |
| | Name | | | □ Schedule E/F, lir | |
| | | | | ☐ Schedule G, line | · |
| | Number Street | | | _ | |
| (| City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | _ ☐ Schedule E/F, lire | |
| | | | | ☐ Schedule G, line | |
| | Number Street | | | _ | |
| (| City | State | ZIP Code | | |

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| Fill | in this information to identify your ca | ase: | | | | | |
|--------------------|--|-------------------------------|---|--------------|-------------------------------|-------------------------------------|---------------------------|
| Del | otor 1 Linda J. Sm | ith | | | | | |
| | otor 2 | | | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | |
| (If kr | se number | | - | | | | |
| | fficial Form 106l | | | Ī | MM / DD/ Y | YYY | |
| S | chedule I: Your Inc | ome | | | | | 12/15 |
| sup spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not filing wi | ng jointly, and your spouse is lith you, do not include informa | living with | n you, inclu It your spo | ude information ouse. If more sp | about your ace is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | Debtor 2 or non-filing spouse | | |
| | If you have more than one job, | Employment status | ■ Employed | | ☐ Emplo | oyed | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | | ☐ Not e | mployed | |
| | employers. | Occupation | Exex Secretary | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | State of Illinois | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 100 West Randolph Chicago, IL 60601 | | | | |
| | | How long employed t | here? 23 years | | _ | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to report for an | y line, writ | e \$0 in the | space. Include y | our non-filing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information for all em | ployers for | r that perso | n on the lines be | low. If you need |
| | | | | For De | ebtor 1 | For Debtor 2 non-filing sp | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | \$ | 5,064.58 | \$ | N/A |
| 3. | Estimate and list monthly overt | ime pay. | 3. + | \$ | 0.00 | +\$ | N/A |

Calculate gross Income. Add line 2 + line 3.

5,064.58

N/A

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| Deb | otor 1 | Linda J. Smith | | | Case | e number (if kn | own) | | | | | |
|-----|--------------|--|----------|-----------|-----------|-----------------|------|-------------|--------|----------------|----------|-------|
| | | | | | Fo | r Debtor 1 | | | Debtor | | | |
| | Cop | y line 4 here | 4. | | \$_ | 5,064 | .58 | \$ | | N/A | <u> </u> | |
| 5. | List | all payroll deductions: | | | | | | | | | | |
| 0. | 5a. | Tax, Medicare, and Social Security deductions | 58 | a | \$ | 1,317 | 75 | \$ | | N/A | | |
| | 5b. | Mandatory contributions for retirement plans | 5k | | \$- | <u> </u> | 2.69 | \$ - | | N/A | _ | |
| | 5c. | Voluntary contributions for retirement plans | 50 | | \$ | | .00 | \$_ | | N/A | _ | |
| | 5d. | Required repayments of retirement fund loans | 50 | | \$- | | 0.00 | \$_ | | N/A | _ | |
| | 5e. | Insurance | 56 | | \$ | | .03 | \$ - | | N/A | _ | |
| | 5f. | Domestic support obligations | 5f | | \$ | | .00 | \$ | | N/A | _ | |
| | 5g. | Union dues | 50 | | \$ | | .58 | \$ | | N/A | _ | |
| | 5h. | Other deductions. Specify: | | า.+ | \$ | | .00 | + \$ | | N/A | _ | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | _ 6. | | \$ | 2,042 | | \$ | | N/A | _ | |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 3,022 | | * — \$ | | N/A | _ | |
| | | | • | | Ψ – | 0,022 | | Ψ_ | | 11// | _ | |
| 8. | 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | | | |
| | | monthly net income. | 88 | a. | \$ | 0 | .00 | \$ | | N/A | | |
| | 8b. | Interest and dividends | 8k | э. | \$ | 0 | .00 | \$ | | N/A | <u> </u> | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 80 | C. | \$ | O | 0.00 | \$ | | N/A | | |
| | 8d. | Unemployment compensation | 80 | | \$ | | .00 | \$ | | N/A | | |
| | 8e. | Social Security | 86 | Э. | \$ | | .00 | \$ | | N/A | _ | |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f 8(| | \$_ \$ | | 0.00 | \$_ \$_ | | N/A N/A | _ | |
| | 8h. | Other monthly income. Specify: | | ษ. า.+ | \$- | | 0.00 | + \$- | | N/A | _ | |
| | | | | | | | | | | | _ | |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | | \$_ | 0 | .00 | \$_ | | N/ | Α | |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 3,022.53 | + \$ | | N/A | = \$ | 3.03 | 22.53 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | - | | 0,022.00 | 1 | | 14/74 | * - | 0,02 | -2.00 |
| 11. | Incl othe | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify: | dep | | | • | | | | e J. +\$ | | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | | | 12. | \$ | • | 22.53 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form | ? | | | | | | | Combi month | | ome |
| | | No. | | | | | | | | | | |

Official Form 106I Schedule I: Your Income

page 2

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| Fill_i | in this information to identify your case: | | l | | |
|-------------|---|---------------------------|------------------|-------------------------------------|-------------------------------|
| Debt | | | Check | ; if this is: | |
| | otor 2 | | □ A | an amended filing a supplement show | ving postpetition chapter |
| (Spo | ouse, if filing) | | 1 | 3 expenses as of | the following date: |
| Unite | ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL | LINOIS | V | MM / DD / YYYY | |
| | e numbernown) | | | | |
| | fficial Form 106J | | | | |
| | chedule J: Your Expenses | Cilian tanadi an b | - (1 | U | 12/15 |
| info | as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to th mber (if known). Answer every question. | | | | |
| Part | | | | | |
| 1. | Is this a joint case? No. Go to line 2. | | | | |
| | Yes. Does Debtor 2 live in a separate household? | | | | |
| | □ No | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expens | ses for Separate House | ehold of Debto | or 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| | Do not list Debtor 1 and Debtor 2. | | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | - | | | ☐ Yes ☐ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| | | - | | | ☐ Yes ☐ No |
| | | | | | ☐ No☐ Yes |
| 3. | Do your expenses include ■ No | | | | _ 100 |
| | expenses of people other than yourself and your dependents? | | | | |
| Part | t 2: Estimate Your Ongoing Monthly Expenses | | | | |
| Esti exp | imate your expenses as of your bankruptcy filing date unlessenses as of a date after the bankruptcy is filed. If this is a sublicable date. | | | | |
| the | lude expenses paid for with non-cash government assistand value of such assistance and have included it on <i>Schedule</i> ficial Form 106I.) | | | Your expe | enses |
| 4. | The rental or home ownership expenses for your residence payments and any rent for the ground or lot. | e. Include first mortgage | e 4. \$ | | 1,068.69 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 10 °C | | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4a. \$ 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 150.00 |
| _ | 4d. Homeowner's association or condominium dues | | 4d. \$ | | 0.00 |
| 5. | Additional mortgage payments for your residence, such as | home equity loans | 5. \$ | | 0.00 |

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| Debtor 1 | Linda J. Smith | Case num | ber (if known) | |
|----------------|---|----------|----------------|-----------------------------|
| 6. Util | ities: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 200.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 50.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 140.00 |
| 6d. | Other. Specify: | 6d. | \$ | 0.00 |
| Foo | d and housekeeping supplies | | \$ | 350.00 |
| Chi | Idcare and children's education costs | 8. | \$ | 0.00 |
| Clo | thing, laundry, and dry cleaning | 9. | \$ | 180.00 |
|). Per | sonal care products and services | 10. | \$ | 80.00 |
| i. Me | dical and dental expenses | 11. | \$ | 329.00 |
| 2. Tra | nsportation. Include gas, maintenance, bus or train fare. | | | |
| | not include car payments. | 12. | \$ | 120.00 |
| 3. Ent | ertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 50.00 |
| l. Cha | ritable contributions and religious donations | 14. | \$ | 0.00 |
| | urance. | | | |
| | not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | . Life insurance | 15a. | | 0.00 |
| | . Health insurance | 15b. | | 0.00 |
| 15c | . Vehicle insurance | 15c. | \$ | 97.00 |
| | . Other insurance. Specify: | 15d. | \$ | 0.00 |
| | es. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| | cify: | 16. | \$ | 0.00 |
| | allment or lease payments: | 4- | • | |
| | . Car payments for Vehicle 1 | 17a. | | 207.00 |
| | . Car payments for Vehicle 2 | 17b. | · | 0.00 |
| | Other. Specify: | 17c. | · | 0.00 |
| | . Other. Specify: | 17d. | \$ | 0.00 |
| 3. Yo ı | r payments of alimony, maintenance, and support that you did not report as | 18. | c | 0.00 |
| | lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 10. | \$ | |
| | er payments you make to support others who do not live with you. | 19. | \$ | 0.00 |
| | cify: er real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i> c | | our Incomo | |
| | Mortgages on other property | 20a. | | 0.00 |
| | . Real estate taxes | 20b. | · | 0.00 |
| | Property, homeowner's, or renter's insurance | 20b. | · | 0.00 |
| | . Maintenance, repair, and upkeep expenses | 20d. | | |
| | | | · | 0.00 |
| | . Homeowner's association or condominium dues | 20e. | · | 0.00 |
| l. Oth | er: Specify: | 21. | +\$ | 0.00 |
| 2. Cal | culate your monthly expenses | | | |
| 22a | . Add lines 4 through 21. | | \$ | 3,021.69 |
| 22b | . Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | . Add line 22a and 22b. The result is your monthly expenses. | | \$ | 3,021.69 |
| 220 | . Add the ZZa and ZZb. The result is your monthly expenses. | | Ψ | 3,021.09 |
| 3. Cal | culate your monthly net income. | | | _ |
| | . Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 3,022.53 |
| 23b | . Copy your monthly expenses from line 22c above. | 23b. | -\$ | 3,021.69 |
| | | | | |
| 230 | . Subtract your monthly expenses from your monthly income. | 66 | • | 0.84 |
| | The result is your monthly net income. | 23c. | \$ | 0.04 |
| For | you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect your rification to the terms of your mortgage? | | | se or decrease because of a |
| | No. | | | |
| П, | | | | |

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| Fill in this i | nformation to identify your | case: | | | |
|--------------------------------|---|--------------------------|-----------------------------|--------------------------|---|
| Debtor 1 | Linda J. Smith | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | j) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number (if known) | er | | | | ☐ Check if this is an amended filing |
| Official F | Form 106Dec | | | | |
| Declai | ration About a | ın Individual | Debtor's Sc | hedules | 12/15 |
| obtaining m | | n connection with a bank | | | ement, concealing property, or 0, or imprisonment for up to 20 |
| Did yo | u pay or agree to pay some | one who is NOT an attor | rney to help you fill out b | pankruptcy forms? | |
| ■ N | 0 | | | | |
| □ Y | es. Name of person | | | | ruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | penalty of perjury, I declare by are true and correct. | that I have read the sum | nmary and schedules file | ed with this declaration | on and |
| X /s/ | Linda J. Smith | | X | | |
| | nda J. Smith Inature of Debtor 1 | | Signature of | Debtor 2 | |

Date _____

Date March 13, 2018

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| Fill | in this inforn | nation to identify you | r case: | | | |
|---|---|---------------------------|--|---|---|---|
| Deb | tor 1 | Linda J. Smith First Name | Middle Name | Last Name | | |
| | tor 2 | | | 2451.744.115 | | |
| (Spot | use if, filing) | First Name | Middle Name | Last Name | | |
| Unit | ed States Bar | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Case number | | | | | _ | Check if this is an mended filing |
| Sta Be a infor | s complete a | of Financial | attach a separate sheet to | are filing together, both are | ankruptcy equally responsible for sup y additional pages, write you | |
| | | , | nrital Status and Where You | Lived Before | | |
| 1. | What is your current marital status? | | | | | |
| | ☐ Married■ Not mar | ried | | | | |
| 2. | During the last 3 years, have you lived anywhere other than where you live now? | | | | | |
| | ■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | |
| | Debtor 1 Prior Address: | | Dates Debtor 1 lived there | Debtor 2 Prior Address: | | Dates Debtor 2 lived there |
| | | | | | ity property state or territory co, Texas, Washington and W | |
| | ■ No□ Yes. Make sure you fill out <i>Schedule H: Your Codebtors</i> (Official Form 106H). | | | | | |
| Part | Explai | n the Sources of You | r Income | | | |
| | Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. | | | | | |
| | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | | | ■ Wages, commissions, bonuses, tips | \$7,285.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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Debtor 1 Linda J. Smith

| | Debtor 1 | | Debtor 2 | |
|--|--|--|---|---|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For last calendar year: (January 1 to December 31, 2017) | ■ Wages, commissions, bonuses, tips | \$51,246.00 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| | ☐ Wages, commissions, bonuses, tips | \$-20,862.00 | ☐ Wages, commissions, bonuses, tips | |
| | Operating a business | | ☐ Operating a business | |
| For the calendar year before that: (January 1 to December 31, 2016) | ■ Wages, commissions, bonuses, tips | \$49,475.00 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| | ☐ Wages, commissions, bonuses, tips | \$-13,632.00 | ☐ Wages, commissions, bonuses, tips | |
| | Operating a business | | ☐ Operating a business | |
| 5. Did you receive any other income Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cas List each source and the gross income. | ner that income is taxable. Exa pensions; rental income; inter se and you have income that y | amples of other income are all test; dividends; money collect you received together, list it o | ed from lawsuits; royalties; an nly once under Debtor 1. | |

| Describe below. | each source |
|-----------------|------------------------|
| | (before deductions and |
| | ovelucione) |

Debtor 1

Sources of income

List Certain Payments You Made Before You Filed for Bankruptcy

| □ | No. | Neither D | ebtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an primarily for a personal, family, or household purpose." |
|---|-----|------------|--|
| | | During the | 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? Go to line 7. |
| | | ☐ Yes | List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. |
| | | * Subject | to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. |

Gross income from

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

 \square Yes

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Debtor 2

Sources of income

Describe below.

No

Yes. Fill in the details.

Gross income

and exclusions)

(before deductions

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Case number (if known) Document Debtor 1 Linda J. Smith

| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this page | yment for |
|-----|---|---|---|---|----------------------------------|--|
| 7. | Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | ortners; relatives of any gen control, or owner of 20% o | eral partners; partner r more of their votin | erships of which yo g securities; and ar | u are a genera ny managing aq | I partner; corporations gent, including one for |
| | ☐ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for t | this payment |
| 8. | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No | | ments or transfer a | any property on a | ccount of a de | bt that benefited an |
| | ☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for to | this payment tor's name |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | s, divorces, collection | on suits, paternity a | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | e case |
| 10. | Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11. | | erty repossessed, t | foreclosed, garnis | hed, attached | , seized, or levied? |
| | Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the property |
| | | Explain what happened | 1 | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment becomes No ☐ Yes. Fill in the details. | | luding a bank or fi | nancial institution | , set off any a | mounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | Date a | action was | Amount |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a | | erty in the possess | sion of an assigne | e for the bene | fit of creditors, a |
| | ■ No □ Yes | | | | | |

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Case number (if known) Document Debtor 1 Linda J. Smith

| Pai | t 5: List Certain Gifts and Contributions | | | |
|-----|---|--|-----------------------------------|---------------------------|
| 13. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift. | otcy, did you give any gifts with a total value of more t | han \$600 per person | ? |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address: | Describe the gifts | Dates you gave the gifts | Value |
| 14. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co | otcy, did you give any gifts or contributions with a tota | al value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | tal Describe what you contributed | Dates you contributed | Value |
| Pai | t 6: List Certain Losses | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? No Yes. Fill in the details. | tcy or since you filed for bankruptcy, did you lose any | thing because of the | ft, fire, other disaster, |
| | how the loss occurred | Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Pai | t 7: List Certain Payments or Transfers | | | |
| 16. | consulted about seeking bankruptcy or pr | tcy, did you or anyone else acting on your behalf pay or eparing a bankruptcy petition? eparers, or credit counseling agencies for services require | | rty to anyone you |
| | □ No ■ Yes. Fill in the details. | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | David M. Dabertin 5246 Hohman Avenue, Suite 302 Hammond, IN 46320 | Attorney Fees | | \$760.00 |
| 17. | | tcy, did you or anyone else acting on your behalf pay of tors or to make payments to your creditors? ou listed on line 16. | or transfer any prope | rty to anyone who |
| | ■ No □ Yes. Fill in the details. | | | |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |

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Debtor 1 Linda J. Smith

| 18. | Within 2 years before you filed for bankrup transferred in the ordinary course of your lead include both outright transfers and transfers minclude gifts and transfers that you have alreated No Yes. Fill in the details. | business or financial affa nade as security (such as | airs? the granting of a | | | |
|-----|--|--|----------------------------|-----------------|---|---|
| | Person Who Received Transfer Address Person's relationship to you | Description and v | | | any property or s received or debts xchange | Date transfer was made |
| 19. | Within 10 years before you filed for bankru beneficiary? (These are often called asset-pr | | ny property to a | self-settled ti | rust or similar device o | of which you are a |
| | Yes. Fill in the details. Name of trust | Description and v | value of the pro | perty transfer | red | Date Transfer was |
| | | | - a.a. o. a.a p. o. | po. 1,a | | made |
| Pai | t 8: List of Certain Financial Accounts, Ir | nstruments, Safe Deposi | t Boxes, and St | orage Units | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | cl m | ate account was losed, sold, loved, or ansferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? | year before you filed for | r bankruptcy, ar | ny safe depos | sit box or other deposi | tory for securities, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe the | e contents | Do you still have it? |
| 22. | Have you stored property in a storage unit | or place other than your | r home within 1 | year before y | ou filed for bankruptc | y? |
| | ■ No | | | | | |
| | ☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or I to it? Address (Number, S State and ZIP Code) | | Describe the | e contents | Do you still have it? |
| Pai | t 9: Identify Property You Hold or Contro | , | | | | |
| 23. | Do you hold or control any property that so for someone. | | ude any propert | ty you borrow | ved from, are storing fo | or, or hold in trust |
| | ☐ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe the | property | Value |
| Pai | t 10: Give Details About Environmental In | formation | | | | |
| For | the purpose of Part 10, the following definit | ions apply: | | | | |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Linda J. Smith

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| | Hazar | uous materiai, ponutant, contaminant, | or similar term. | | | |
|-----|---|--|--|-------|--|--------------------|
| Rep | ort all | notices, releases, and proceedings tha | t you know about, regardless of wher | n the | y occurred. | |
| 24. | 4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | | e of site ess (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice |
| 25. | Have | you notified any governmental unit of | any release of hazardous material? | | | |
| | | lo ′es. Fill in the details. | | | | |
| | | e of site ess (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | Environmental law, if you know it | Date of notice |
| 26. | 6. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | | Title Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ture of the case | Status of the case |
| Par | t 11: | Give Details About Your Business or 0 | Connections to Any Business | | | |
| 27. | Withir | n 4 years before you filed for bankrupt | cy, did you own a business or have an | ny of | the following connections to any | business? |
| | | A sole proprietor or self-employed in | a trade, profession, or other activity, | eith | er full-time or part-time | |
| | | A member of a limited liability comp | any (LLC) or limited liability partnersh | ip (L | LP) | |
| | | A partner in a partnership | | | | |
| | | ☐ An officer, director, or managing exe | ecutive of a corporation | | | |
| | | An owner of at least 5% of the voting | or equity securities of a corporation | | | |
| | – N | lo. None of the above applies. Go to P | art 12. | | | |
| | □ Y | es. Check all that apply above and fill | in the details below for each business | s. | | |
| | Busii | ness Name | Describe the nature of the business | | Employer Identification number | |
| | | er, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | Do not include Social Security number or ITIN. Dates business existed | |
| 28. | | n 2 years before you filed for bankruptoutions, creditors, or other parties. | cy, did you give a financial statement | to an | | de all financial |
| | – N | lo | | | | |
| | | es. Fill in the details below. | | | | |
| | Name Addr (Numb | | Date Issued | | | |

Part 12: Sign Below

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Debtor 1 Linda J. Smith

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ Linda J. Smith Linda J. Smith | | | |
|-----------------------------------|-------------------------------------|--|--------------------------------|
| | | Signature of Debtor 2 | Signature of Debtor 2 |
| Signa | ture of Debtor 1 | | |
| Date | March 13, 2018 | Date | |
| Did yo | u attach additional pages to Your S | Statement of Financial Affairs for Individuals Filing for Ba | ankruptcy (Official Form 107)? |
| No | | | |
| □ Yes | 3 | | |
| Did yo | u pay or agree to pay someone who | o is not an attorney to help you fill out bankruptcy forms | ? |
| No | | | |
| ☐ Yes | s. Name of Person Attach the | Bankruptcy Petition Preparer's Notice, Declaration, and Sign | nature (Official Form 119). |

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| Fill in this inform | ation to identify your o | ·250· | | | | |
|----------------------------------|--|-----------------------|---------------------|---|----------------|--|
| | | , doc. | | | | |
| Debtor 1 | Linda J. Smith First Name | Middle Name | Last I | Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last I | Name | | |
| United States Ban | kruptcy Court for the: | NORTHERN DIST | RICT OF ILLINOIS | <u> </u> | | |
| Case number | | | | | | |
| (if known) | | | | | | Check if this is an amended filing |
| Official For | m 108 | | | | | |
| Statemen | t of Intentio | n for Indiv | iduals Fil | ing Under Chap | ter 7 | 12/15 |
| If you are an indiv | idual filing under chap | oter 7, you must fill | out this form if: | | | |
| creditors have | claims secured by you | ır property, or | | | | |
| You must file this | er is earlier, unless th | ithin 30 days after | you file your bank | ruptcy petition or by the date ou must also send copies to | | |
| • | ople are filing together I date the form. | in a joint case, bo | th are equally resp | oonsible for supplying correc | t informatio | n. Both debtors must |
| | nd accurate as possib ur name and case nun | | needed, attach a | separate sheet to this form. (| On the top o | f any additional pages, |
| Part 1: List You | ur Creditors Who Have | Secured Claims | | | | |
| 1. For any credito | rs that vou listed in Pa | rt 1 of Schedule D | Creditors Who H | ave Claims Secured by Prope | ertv (Official | Form 106D), fill in the |
| information bel | ow. | | | • • | - ` | ,, |
| identity the cred | ditor and the property th | iat is collateral | secures a debt? | end to do with the property t | | d you claim the property exempt on Schedule C? |
| Creditor's Cr | edit Acceptance Co | rporation | ☐ Surrender the | property. | • | No |
| name: | | | ` | operty and redeem it. | | |
| Description of | 2007 Nissan Altima | 138000 | Retain the pro | pperty and enter into a | Ц | Yes |
| property securing debt: | miles | | _ | operty and [explain]: | | |
| Port 2: List Vo. | ur Unavaired Personal | Droporty Logge | | | | |
| For any unexpired | ur Unexpired Personal I personal property lea | se that you listed | in Schedule G: Ex | ecutory Contracts and Unexp | pired Leases | (Official Form 106G), fill |
| | | | | leases that are still in effect ot assume it. 11 U.S.C. § 365(| | eriod has not yet ended. |
| Describe your un | expired personal prop | erty leases | | | Will the | lease be assumed? |
| Lessor's name: | | | | | □ No | |
| Description of leas Property: | sed | | | | ☐ Yes | |
| Lessor's name: | | | | | □ No | |
| Description of leas Property: | sed | | | | ☐ Yes | |
| Lessor's name: | | | | | □ No | |

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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| Debtor 1 Lin | ida J. Smith | Case number (if known) | |
|--|---|--------------------------------------|-------------------------------|
| Description of I | eased | | ☐ Yes |
| Lessor's name: Description of le Property: | | | □ No □ Yes |
| Lessor's name: | | | □ No |
| Property: Lessor's name: Description of I | | | ☐ Yes ☐ No |
| Property: Lessor's name: | : | | ☐ Yes |
| Description of le Property: | eased | | ☐ Yes |
| | Below of perjury, I declare that I have indicated my intention abou | t any property of my estate that see | cures a deht and any nersonal |
| property that is | s subject to an unexpired lease. | t any property of my estate that set | cures a debt and any personal |
| Linda J. | | Signature of Debtor 2 | |
| Date | March 13, 2018 Da | te | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| · | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-07193 Doc 1 Filed 03/13/18 Entered 03/13/18 14:01:07 Desc Main Document Page 49 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Linda J. Smith | | Case No | |
|-------|---|---|--|---|
| | | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPEN | SATION OF ATTO | RNEY FOR I | EBTOR(S) |
| (| Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | of the petition in bankruptcy | , or agreed to be pa | d to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 760.00 |
| | Prior to the filing of this statement I have received | | | 760.00 |
| | Balance Due | | | 0.00 |
| 2. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 3. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | ■ I have not agreed to share the above-disclosed compe | nsation with any other persor | unless they are me | mbers and associates of my law firm |
| | ☐ I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the name | ion with a person or persons es of the people sharing in th | who are not membe e compensation is a | rs or associates of my law firm. A tached. |
| 5. | In return for the above-disclosed fee, I have agreed to ren | der legal service for all aspec | ets of the bankruptcy | case, including: |
| l | a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Exemption planning; preparation and filing agreement is in the best interest of the defor avoidance of liens on household good | ment of affairs and plan which is and confirmation hearing, a and of reaffirmation agree abtor; preparation and file | h may be required; and any adjourned h ments and applic | earings thereof; ations as needed if the |
| 5.] | By agreement with the debtor(s), the above-disclosed fee Amendments resulting from Debtor's failt debtor in any dischargeability action, jud proceeding. Any services resulting from services related to mortgage loan modific Preparation and filing of income tax returinterest of the debtor. | ure to cooperate or prov icial lien avoidances, rel the Debtor's failure to co cations, sale of property | ide complete info lef from stay acti loperate with the or settlement of | ons or any other adversary Chapter 7 Trustee. Any awsuits by outside counsel. |
| | | CERTIFICATION | | |
| | I certify that the foregoing is a complete statement of any pankruptcy proceeding. | agreement or arrangement fo | or payment to me for | representation of the debtor(s) in |
| _M | larch 13, 2018 | /s/ David M. Dab | | |
| | Date | David M. Dabert | | |
| | | Signature of Attorn David M. Dabert | | |
| | | 5246 Hohman A | venue, Suite 302 | |
| | | | 320 ax: 219-937-1984 | |
| | | Name of law firm | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Linda J. Smith | | Case No. | | |
|-------|---|---|-----------|--|--|
| | | Debtor(s) | Chapter 7 | | |
| | VE | RIFICATION OF CREDITOR MA | ATRIX | | |
| | Number of Creditors: 32 | | | | |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | | |
| Date: | March 13, 2018 | /s/ Linda J. Smith Linda J. Smith Signature of Debtor | | | |

Internal Revenue Service Insolvency P.O. Box 7346 Philadelphia, PA 19101-7346

Illinois Dpt. of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Equifax Attn: Bankruptcy Dept PO Box 740241 Atlanta, GA 30374

Transunion Attn: Bankruptcy Dept PO Box 1000 Chester, PA 19022

Experian
Attn: Bankruptcy Dept
PO Box 2002
Allen, TX 75013

Advocate Medical Group 8550 W. Bryn Mawr Ave. 8th Fl. Chicago, IL 60631

AmeriCash Loans 880 Lee Street Ste 302 Des Plaines, IL 60016

Capital Management Services 726 Exchange Street Ste 700 Buffalo, NY 14210

Capital One Bankruptcy Dept. 6125 Lakeview Road, Ste. 800 Charlotte, NC 28269-2605

Comcast PO Box 3002 Southeastern, PA 19398 Comenity
Bankruptcy Department
PO Box 182125
Columbus, OH 43218-2125

Credit Acceptance Corporation P. O. Box 513 Southfield, MI 48037

Credit Union 1 200 East Champaign Avenue Rantoul, IL 61866

Discover PO Box 30943 Salt Lake City, UT 84130-0943

George E. Morris 2158 W. 183rd Street Homewood, IL 60430

Home Depot PO Box 790340 Saint Louis, MO 63179-0340

IC System, Inc. PO Box 64437 Saint Paul, MN 55164-0437

Illinois Lending 15826 S. LaGrange Road Orland Park, IL 60462

Kia Motors Finance PO Box 20825 Fountain Valley, CA 92728

Kohl's
P. O. Box 3043
Milwaukee, WI 53201-3043

MD Orthotic & Prosthetic 10408 S. Western Avenue Chicago, IL 60643

One Main Financial Bankruptcy Department PO Box 6042 Sioux Falls, SD 57117-6042

Personal Finance Company 9438 W. 191st Street Mokena, IL 60448

PLS Financial Services 800 Jorie Blvd Oak Brook, IL 60523

Portfolio Recovery Assoc. P. O. Box 12914 Norfolk, VA 23541

Praxis Financial Solutions 7301 N. Lincoln Ave., Suite 220 Lincolnwood, IL 60712-1733

RHHS 1000 Abernathy Road Building 400, Suite 200 Atlanta, GA 30328

Sears Card PO Box 6283 Sioux Falls, SD 57117-6283

Select Portfolio Services P. O. box 65250 Salt Lake City, UT 84165

Synchrony Bank Attn: Bankruptcy Dept. PO Box 965060 Orlando, FL 32896-5060

Village of Orland Park/Water 14700 Ravinia Avenue Orland Park, IL 60462

WOW PO Box 4350 Carol Stream, IL 60197-5715